

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	IL NO.	DATE
FEE DETERMINATION	BT		10-6-99
O.I.P.E. CLASSIFIER		5	10/2-99
FORMALITY REVIEW		71090	10/18/99

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1			11/2/99
2			11/2/99
3			11/2/99
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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